

CLAIMS ONLY						Application Number 09/940,541	Filing Date	
						Applicant(s)		
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1		1				51		
2		1				52		
3		1				53		
4		1				54		
5		1				55		
6		1				56		
7		1				57		
8		2				58		
9						59		
10						60		
11						61		
12						62		
13						63		
14						64		
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42						92		
43						93		
44						94		
45						95		
46						96		
47						97		
48						98		
49						99		
50						100		
Total Indep			12			Total Indep		
Total Depend			2			Total Depend		
Total Claims			14			Total Claims		